FRANKLIN COUNTY PETITION/APPLICATION FOR SPECIAL USE PERMIT (Type or Print)

Authorized Agent of the property described below, hereby apply to the Franklin County Board of Supervisors for a special use permit on the property as described below:
1. Petitioners Name: Edward Cubell Gardner
2. Property Owner's Name: Edward Cakell Gardner ECGLL
Phone Number: 540.413-5683
Address: PG Box 169 Calacle Hill VA Zip: 24092
3. Exact Directions to Property from Rocky Mount: 10 east 110 miles
4. Tax Map and Parcel Number: 065000 3000 4 0050003001
5. Magisterial District: Onion Hall
6. Property Information:
A. Size of Property: 16.527 AC - 0.723 a.C.
B. Existing Zoning:
C. Existing Land Use: Corrected Farm
D. Is property located within any of the following overlay zoning districts:
Corridor District Westlake Overlay District Smith Mountain Lake Surface District
E. Is any land submerged under water or part of a lake? Yes No If yes, explain.
7. Proposed Special Use Permit Information:
A. Proposed Land Use: 4 temp camper sites
B. Size of Proposed Use: 3 acres
C. Other Details of Proposed Use: Set up for the 4 Campers to USE existing trainers water, Well

Checklist for completed item	ns:	
Application Form		
Letter of Application		
Concept Plan		
Application Fee		
**I certify that this applicati herein is correct and accurat		
	Petitioner's Name (Print):	Cabell Gardner
	Signature of Petitioner:	Chee for
	Date: Nov. L. 2018	
	Mailing Address: 40 B	× 169
		GROPE AV
	Telephone: 540493-	The state of the s
	Email Address: gardne	builds agmail com
	Owner's consent, if petitioner is n	ot property owner:
	Owner's Name (Print):	ano
	Signature of Owner:	ane
	Date: Su	nu
Date Received by Plant Time: Clerk's Initials:	ning Staff:	
CHECK #: RECPT. #: AMOUNT:		